U.S. Department of Labor Office of Labor-Management Standards Washington DC 20210

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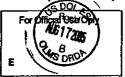
## FORM LM-30 **LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT**

Form approved Office of Management and Budget No 1215-0188 Ехриев 11-30-2006

This report is mandatory under P L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U S C 439 or 440

For principal 95tr Opty

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT



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2 Fiscal Year Covered From:  1 / 1 / 2004 Through 12 / 31 / 2004  3 Name and address of person fitting  4 Name file number and address of labor organization  Name Thomas J Sigurdson  Name International Brotherhood of Electrical Workers Local 8 Labor Organization File Number 013-072  PO Box Bidg Room No if any	]			
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Name Thomas J Sigurdson Name International Brotherhood of Electrical Workers Local 8 Labor Organization File Number 013-072	_			
Electrical Workers Local 8 Labor Organization File Number 013-072				
Labor Organization File Number 013-072	——I			
PO Box Bidg Room No if any				
Street 2407 Jamestown Street 807 Lime City Road				
Caty Northwood City Rossford				
State Ohio ZIP Code + 4 43619_11 40State Ohio ZIP Code + 4 43460	-161			
5 Position in labor organization President of Local Union No 8				
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)  A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent  6. Name and address of Employer (including trade name if any)  7. a. Nature of Interest Transaction or Income  Trade Name if any				
PO Box Bldg Room No if any 7b Amount	7 b Amount			
Street				
City				
State ZIP Code + 4				
: Signature				
15. Signature and verification. The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct, and complete (See the section on penalties in the instructions.)				
anceregation a minimage and determined and complete (one the section on parameter in the triaductions.)	- 1			

Name of Person Filing Thomas J Sigurdson		File Number U-		
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested				
8 Name and address of Business (including trade name if any)  Name  Trade Name if any  P O Box Bidg Room No if any  Street  City  State  ZIP Code + 4  10 if 9 b or 9 c is checked give trust or employer's name  Name  Trade Name if any:  P O Box Bidg Room No if any  Street  City  State  ZIP Code + 4	9 Business deals with  a Labor Organiza b Trust c. Employer  11.a Nature of such deal  11 b Approximate dollar val  12 a Nature of interest he	ling		
	12 b Amount			
C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value				
13.a Name and address of Employer or Labor Relations Consultant (including trade name if any)  Name Cosme, D'Angelo, & Szollosi LPA  Trade Name if any  PO Box Bidg Room No if any  Street 202 N. Erie St  City Toledo  State Ohio Zip Code +4 43624-16				
13.b Is the Business an Employer or Consultant X ?	14 b Amount of payment.	\$37.00		

£"